



Please complete this ENTIRE form. Print this form and mail a copy with a cheque to TDBA to: TDBA, c/o Linda Lee, 3 Marsha Drive, Scarborough, ON M1T 2S3

TDBApresident@gmail.com and send an Interac e-transfer fee to TDBApresident@gmail.com

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Please note: This form is used to update Badminton Ontario's website: Where to Play				
Club Information				
Club Name:		F	acility/School Name:	
Club/Facility Address:			Nearest Intersection:	
City/Postal Code:			Club Website:	
Club Email:			Club Days: MON	TUE WED THU FRI SAT SUN
Type of Club:				
Contact Information				
Name:			Position:	
Address:			Phone (home):	
City/Postal Code:			Phone (cell):	
Email:			**School Board:	
	Affiliation Information  Affiliation Fee - \$75			
Insurance Information (for BON INSURED affiliated clubs) Insurance provided by BON includes general commercial liability for the club & sport accident coverage for individuals: (valid from Sept. 1, 2025 until August 31, 2026)  Please note: 2025-26 insurance summary/terms will be shared with districts and clubs and posted on the BON website when the documents are received from the insurance company.  NOTE: If a badminton camp is run as part of the club's badminton program, camp players are covered by this policy ONLY if the club is a BON insured affiliated club.  Upon receipt of this form and fee by TDBA or its Executive, our club agrees to affiliate with TDBA. We also agree to meet the requirements of Badminton Ontario affiliated Clubs as outlined on their website. Failure to comply may result in the club's suspension and REMOVAL of privileges.				

Date:

Make cheque

payable to TDBA

Signed: